

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on August 11, 2003.

## **I. DISPUTE**

Whether there should be reimbursement for CPT codes 99080-73, 97250, 97265, 97122, 97750-FC, and 99213-MP.

## **II. RATIONALE**

- CPT code 99080-73 for date of service 9/23/02 and CPT Codes 97250, 97265, and 99213-MP for date of service 9/25/02 – No EOB submitted by Requestor. The Respondent representative has submitted an EOB dated 10/30/02 for these dates of service showing these dates of service have been paid according to Commission Rules and the 1996 Medical Fee Guideline and no further reimbursement is recommended.
- CPT code 97122 for date of service 11/19/02 denied as “F – therapeutic procedure, one or more areas, each 15 minutes: traction, manual”. Per the 1996 Medical Fee Guideline, Medicine Ground Rule (I)(A)(9)(b) SOAP note submitted for this date of service does not support manual traction was one of the procedures used during the physical medicine session; therefore, reimbursement is not recommended.
- CPT code 97750-FC for date of service 11/21/02 denied as “F – physical performance test/measure w/ report each 14 min”. Per the 1996 Medical Fee Guideline, Medicine Ground Rule (I)(E)(2) two hours (\$200) for an interim and/or discharge test is allowed. Reimbursement in the amount of \$100.00 (\$200.00 - \$100.00 (reimbursed by carrier)) is recommended.
- CPT code 99213-MP for dates of service 2/4/03 and 2/28/03 denied as “F – The frequency of this procedure exceeds the limitations specified in the fee schedule.” Per the 1996 Medical Fee Guideline, Medicine Ground Rule (I)(B)(1)(b) SOAP notes support delivery of service. Reimbursement in the amount of \$96.00 (\$48.00 x 2) is recommended.
- CPT code 99213-MP for date of service 2/18/03 – No EOB submitted by either party. Per the 1996 Medical Fee Guideline, Medicine Ground Rule (I)(B)(1)(b) SOAP notes support delivery of service. Reimbursement in the amount of \$48.00 is recommended.

### **III. DECISION & ORDER**

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor is entitled to reimbursement for CPT codes 97750-FC, 99213-MP in the amount of \$244.00. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$244.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 30th day of January 2004.

Marguerite Foster  
Medical Dispute Resolution Officer  
Medical Review Division

MF/mf